Centers for Medicare & Medicaid Services

Section 1115 Demonstration FAST TRACK Extension Template for Program Changes

Proposed Demonstration Changes for the Extension Period

A. General Description. Provide an overall description of the changes the state proposes for the extension of the demonstration. Specifically, include information on the expected impact these proposed program changes will have on populations covered by the demonstration and how it furthers the approved objectives and goals of the demonstration.

On December 7, 2021, the Iowa Department of Human Services, now the Iowa Department of Health and Human Services, (the State) submitted a letter to the Centers for Medicare and Medicaid Services (CMS) notifying CMS of the State's discontinuation of the Healthy Behavior program for the Dental Wellness Plan (DWP). At the time, the Healthy Behavior program for the DWP had been suspended during the COVID-19 public health emergency (PHE), and the State indicated it would not be reinstating this program at the end of the PHE, in an effort to promote access to needed dental care. As a result, members enrolled in the DWP are no longer required to complete two Healthy Behavior activities annually or pay a monthly dental contribution in order to receive full dental coverage, and have not been required to do so since the PHE began in March 2020. CMS indicated that the State had the authority to make this change without the need to amend the Special Terms and Conditions (STCs) for the January 1, 2020 through December 31, 2024 demonstration period.

Through this extension application, the State only requests changes to the STCs for the January 1, 2020 through December 31, 2024 STCs to the extent necessary to formally reflect the current policy that the DWP no longer includes the Healthy Behavior program.

B. Expenditure Authorities. List any proposed modifications, additions to, or removal of currently approved expenditure authorities. Indicate how each new expenditure authority is necessary to implement the proposed changes and also how each proposed change furthers the state's intended goals and objectives for the requested extension period.

The State does not request any modifications to expenditure authorities.

C. Waiver Authorities. List any proposed modifications, additions to, or removal of currently approved waiver authorities. Indicate how each new waiver authority is necessary to implement the proposed changes and also how each proposed change furthers the state's intended goals and objectives for the requested extension period.

The State requests a continuation of all waiver authorities; however, the following modifications to three waiver authorities are requested to the extent that they are no longer needed due to elimination of the DWP Healthy Behavior program in an effort to ensure access to dental services:

- Section 1902(a)(14) Premiums
 - To the extent necessary to enable the state to charge premiums for all Dental Wellness Plan enrollees over 50 percent of the federal poverty level.
- Section 1902(a)(17) Comparability

- To the extent necessary to enable the state to vary dental benefits based on premium payment and engagement in healthy behaviors.
- Section 1902(a)(10)(B) Amount, Duration, and Scope of Services
 - To the extent necessary to enable the state to provide different dental benefits to Dental Wellness Plan enrollees based on Healthy Behavior activities annually or payment of a monthly dental contribution.
- **D. Eligibility.** List any proposed changes to the population(s) currently being served under the demonstration.

If the state is proposing to add populations, please refer to the list of Medicaid Eligibility Groups at: <u>http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-</u><u>Topics/Waivers/1115/Downloads/List-of-Eligibility-Groups.pdf</u> when describing Medicaid State plan populations, and for an expansion eligibility group, please provide a plain language description of the group(s) that is sufficiently descriptive to explain to the public.

If the state is proposing to remove any demonstration populations, please include in the justification how the state intends to transition affected beneficiaries into other eligible coverage as outlined in the Special Terms and Conditions (STCs).

The State does not request any modifications to the populations currently served under the demonstration.

E. Benefits and Cost Sharing. Describe any proposed changes to the benefits currently provided under the demonstration and any applicable cost sharing requirements. The justification should include any expected impact these changes will have on current and future demonstration enrollment.

The State requests modifications to the current demonstration period STCs related to benefits to the extent necessary to reflect elimination of the DWP Healthy Behavior program. Specifically, we request to amend STC 28 to reflect that individuals enrolled in the DWP will receive all available dental benefits described in the state plan or alternative benefit plan, as applicable. These benefits are no longer subject to the healthy behavior or premium requirements in STC 28, b.

Similarly, the State requests modifications to the current demonstration period STCs for cost sharing to the extent necessary to reflect elimination of premiums for the DWP only, due to elimination of DWP Healthy Behavior program in an effort to promote access to dental care. Specifically, the State requests that:

- STC 30 be amended to remove any references to DWP premiums, and
- *STC 31, b., outlining DWP premium exemptions, be removed.*
- **F. Delivery System.** Describe any proposed changes to the healthcare delivery system by which benefits will be provided to demonstration enrollees. The justification should include how the state intends a seamless transition for demonstration enrollees and any expected impact on current and future demonstration enrollment.

The State does not request any modifications to the healthcare delivery system under the demonstration.

G. Budget/Allotment Neutrality. Describe any proposed changes to state demonstration financing (i.e., sources of state share) and/or any proposed changes to the overall approved budget/allotment neutrality methodology for determining federal expenditure limits (other than routine updates based on best estimate of federal rates of change in expenditures at the time of extension).

The State does not request any modifications to state demonstration financing or budget neutrality.

H. Evaluation. Describe any proposed changes to the overall demonstration evaluation design, research questions or hypotheses being tested, data sources, statistical methods, and/or outcome measures. Justification should include how these changes furthers and does not substantially alter the currently approved goals and objectives for the demonstration.

As previously described, the State permanently removed the DWP Healthy Behavior program during the PHE. While this policy change did not require amended STCs at the time, per CMS, it did result in a modified evaluation plan for the DWP component of the demonstration. The State does not request any further modifications to the demonstration evaluation design from those that were approved by CMS on June 23, 2023.

I. Other. Describe proposed changes to any other demonstration program feature that does not fit within the above program categories. Describe how these change(s) furthers the state's intended goals and objectives for the requested extension period.

The current demonstration period STCs describe operation of both the Iowa Wellness Plan and DWP Healthy Behavior programs. Specifically, STC 33 indicates that these components are authorized pursuant to the CMS-approved protocols described in STC 34. The State requests changes to STC 33 and 34 to the extent necessary to reflect elimination of the DWP Healthy Behavior program. The State also requests any other conforming changes to the STCs to reflect the elimination of the DWP Healthy Behavior program, such as reporting and monitoring.

State Contact Person(s)

Please provide the contact information for the state's point of contact for this demonstration extension application.

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